Attachment: Proof of Insurance
Please save attachment and use the file name above.

Proof of Insurance §1-35(b)(19); 245.210(a)(19), 245.210(d), 245.210(e).
Attach proof of insurance for yourself and any contractor performing HVHHF operations at the well to cover injuries, damages, or loss related to pollution in the amount of at least $5,000,000 per occurrence.

Is any part of the well or well site in an area identified by the U.S. Geological Service as having a 2% or greater probability of exceedance in 50 years of peak ground acceleration of 0.4 standard gravity or more? If any part of the well or well site is in an area identified by the U.S. Geological Service as having a 2% or greater probability of exceedance in 50 years of peak ground acceleration of 0.4 standard gravity or more, the insurance policy must have an earthquake damage clause or rider. See 245.210(d).

If any part of the well or well site is in an area identified as a floodplain under 17 Ill. Adm. Code 3700 or 3706, the insurance policy must have a clause or rider providing coverage against loss or claims resulting from impacts from any aspect of the permitted operations following floods. See 245.210(e).
CERTIFICATE OF LIABILITY INSURANCE

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFER NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFERRED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER
Willis of Texas, Inc.
P.O. Box 106191
Nashville, TN 37230-191

INSURED
RCS Energy Services, LP
661 Cherry Street
P.O. Box 2189
Pt. Worth, TX 76102

CERTIFICATE NUMBER: 24831170

REVISION NUMBER: See Remarks

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFERRED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

<table>
<thead>
<tr>
<th>INTR.</th>
<th>TYPE OF INSURANCE</th>
<th>AMOUNT</th>
<th>SUB limits of insurance with respect to each occurrence (in thousands)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>COMMERCIAL GENERAL LIABILITY</td>
<td>$1,000,000</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>B</td>
<td>AUTOMOBILE LIABILITY</td>
<td>$1,000,000</td>
<td>$1,000,000</td>
</tr>
<tr>
<td>A</td>
<td>UMBRELLA LIABILITY</td>
<td>$5,000,000</td>
<td>$5,000,000</td>
</tr>
<tr>
<td>B</td>
<td>WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY</td>
<td>$1,000,000</td>
<td>$1,000,000</td>
</tr>
</tbody>
</table>

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES: (ACORD 191) Additional Remarks: Schedule may be attached if more space is required.

THIS voids and replaces previously issued certificate dated: 7/27/2016 with ID:

See Attached for Named Insured List:

CERTIFICATE HOLDER
Woolsey Operating Company
Attn: Geri Cooper
125 North Market, Suite 1000
Wichita, KS 67202

CANCELLATION
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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ADDITIONAL REMARKS SCHEDULE

AGENCY CUSTOMER ID: 
AGENCY: Willis of Texas, Inc.
POLICY NUMBER: See First Page
CARRIER: See First Page
NAMED INSURED: Basic Energy Services, LP
Basic Energy Services, Inc. (dba BES Holding Co.)
Basic Energy Services GP, LLC
Basic Energy Services LP, LLC
Basic EEA, Inc.
Basic Marine Services, Inc.
First Energy Services Company
Globe Well Service, Inc.
JetStar Energy Services, Inc.
JetStar Holdings, Inc.
Lubus Oil Field Service Co.
Oilwell Fracturing Services, Inc.
SCH Disposal, LLC.
Sledge Drilling Corp.
Xterra Fishing & Rental Tools Co.
Pazzman Plaza, LLC
Hemmessey Rental Tools, Inc.
Chaparral Service, Inc.
JS Acquisition, LLC
Wildhorse Services, Inc.
Taylor Industries, LLC
Platinum Pressure Services, Inc.
Admiral Well Service, Inc.
The Maverick Companies, LLC.
Maverick Stimulation Company, LLC.
Maverick Coiled Tubing Services, LLC.
Maverick Solutions, LLC.
MCM Holdings, LLC.
Maverick Leasing, LLC.
Maverick Thru-Tubing Services, LLC.
Acid Services, LLC.
Robota Energy Equipment, LLC.

Additional insured on General Liability in favor of certificate holder as required by written contract per policy clause CGU130T.

Additional Insured in favor of Certificate Holder on Automobile Liability as required by written contract regarding work performed by the named insured(s).

GCL WAIVER OF SUBROGATION ENDORSEMENT (CGU121)
Underwriters agree to waive their rights of subrogation against any principal whose waiver is required by written contract but only in respect of liability for Bodily Injury and/or Property Damage arising out of operations performed by you and only to the extent required under contract.

Waiver of Subrogation in favor of Certificate Holder on Automobile and Workers Compensation as required by written contract regarding work performed by the named insured(s).

General Liability
Policy No: 
Bureau: Lloyd's Syndicate

Sudden & Accidental Pollution coverage is provided as per the following policy provision:
THE FOLLOWING ENDORSEMENT REPLACES THE TERMS OF ANY OTHER SEEPAGE AND POLLUTION EXCLUSION(S) CONTAINED IN THIS POLICY (CGU12B & Amendatory §3)
This policy does not apply to any actual or alleged liability for Bodily Injury, Property Damage, or Advertising Injury directly or indirectly caused by or arising out of seepage, pollution, or contamination however caused whenever or wherever happening.
This exclusion shall not apply where all of the following conditions are shown by the "Insured" to have been met:
a. the seepage, pollution or contamination was caused by an occurrence; and,
b. the occurrence first commenced on an identified specific date during the period of this policy; and,
c. the occurrence was first discovered by the insured within 45 days of such first commencement;
ADDITIONAL REMARKS SCHEDULE

AGENCY

Willis of Texas, Inc.

NAMED INSURED

Basic Energy Services, LP
801 Cherry Street
Suite 2100
Ft. Worth, TX 76102

POLICY NUMBER

See First Page

EFFECTIVE DATE: See First Page

CARRIER

See First Page

NAIC CODE

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE

and,

d. written notification of the occurrence was first received from the insured by us within 90 days
of the insured’s first discovery of the occurrence; and,

a. the occurrence did not result from the insured’s intentional violation of any statute, rule,
ordinance or regulation.

Even if the above conditions a. to e. are satisfied, this policy does not apply to any actual or
alleged liability:

(i) to abate or investigate any threat of seepage onto or pollution or contamination of the
property of a third party;

(ii) for seepage, pollution or contamination of property which is or was, at any time, owned,
leased, rented or occupied by any Insured, or which is or was, at any time, in the care, custody or
control of any Insured (including the soil, minerals, water or any other substance on, in or under
such owned, leased, rented, occupied or controlled property or property in such care, custody or
control);

As used in sub-paragraph (ii), oil and gas leasehold properties are not considered owned, leased,
rented or occupied properties or properties in the Insured’s care, custody or control.

In consideration of this extension of coverage, coverage is always subject to conditions a. to e.
of this endorsement.

(iii) arising out of the handling, processing, treatment, storage, disposal or dumping of any waste
materials or substances, or arising out of such waste materials or substances during
transportation.

This sub-paragraph (iii) shall not apply to Bodily Injury or Property Damage generated from the
Insured’s operations involving the transportation and handling of salt water or brine water or frac
fluid, cutting(s) or waste products.

Notwithstanding the above, this Policy shall not indemnify the Insured for liability in respect of
the disposal and dumping of any waste materials or substances.

Excess Liability policy is follow form to scheduled underlying subject to policy terms,
conditions, and exclusions.
ACORD
CERTIFICATE OF LIABILITY INSURANCE

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PRODUCER
IMA, Inc. - Wichita Division
PO Box 2992
Wichita, KS 67201
316 267-9221

INSURED
Woolsey Operating Company, LLC
125 N Market Ste 1000
Wichita, KS 67202-1729

INSURER(S) AFFORDING COVERAGE
INSURER A: Federal Insurance Company
INSURER B: Everest National Insurance Co.
INSURER C: Vigilant Insurance Company

COVERAGES

COVERAGE NUMBER:
REVISED NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

<table>
<thead>
<tr>
<th>INSR</th>
<th>TYPE OF INSURANCE</th>
<th>ADDL/BUR</th>
<th>CNTR</th>
<th>POLICY NUMBER</th>
<th>POLICY EFF</th>
<th>POLICY EXP</th>
<th>LIMITS</th>
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<tbody>
<tr>
<td>A</td>
<td>X COMMERCIAL GENERAL LIABILITY</td>
<td>CLAIMS-MADE</td>
<td>X OCCUR</td>
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<td>08/01/2016</td>
<td>08/01/2017</td>
<td>EACH OCCURRENCE $1,000,000</td>
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<td>DAMAGE TO RENTED PREMISES (ex occurrence) $1,000,000</td>
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<td>MED EXP (Any one person) $15,000</td>
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<td>PERSONAL &amp; ADV INJURY $1,000,000</td>
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<td>PRODUCTS - COM/OP ADJ $2,000,000</td>
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<td>A</td>
<td>X AUTOMOBILE LIABILITY</td>
<td>ANY AUTO</td>
<td>SCHEDULED AUTOS</td>
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<td>08/01/2017</td>
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<td>ALL OWNED AUTOS</td>
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<td>BODILY INJURY (Per person) $</td>
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<td>HIRED AUTOS</td>
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<td>BODILY INJURY (Per accident) $</td>
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<td>PROPERTY DAMAGE (Per accident) $</td>
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<td>EXCESS LIABILITY</td>
<td>CLAIMS-MADE</td>
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<td>08/01/2016</td>
<td>08/01/2017</td>
<td>EACH OCCURRENCE $5,000,000</td>
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<td>AGGREGATE $5,000,000</td>
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<td>B</td>
<td>WORKERS COMPENSATION &amp; EMPLOYERS LIABILITY</td>
<td>T/N Officier MEMBER EXCLUDED?</td>
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<td>08/01/2016</td>
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<td>E.L. EACH ACCIDENT $1,000,000</td>
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<td>E.L. DISEASE - EA EMPLOYEE $1,000,000</td>
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<td>E.L. DISEASE - POLICY LIMIT $1,000,000</td>
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<tr>
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<td>08/01/2017</td>
<td>EACH POLLUTION INCIDENT $1,000,000</td>
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<td>Aggregate $2,000,000</td>
</tr>
</tbody>
</table>

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101): Additional Remarks Schedule, may be attached if more space is required.
Excess Liability is excess over the General Liability, Pollution Liability, Auto Liability and Employers Liability coverages, subject to the terms and conditions of the policy.

CERTIFICATE HOLDER
Illinois Department of Natural Resources
Office of Oil
and Gas Resource Management
One Natural Resources Way
Springfield, IL 62707

CANCELLATION
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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